



FROM : JHU/APL OFFICE OF COUNSEL

FAX NO. : 2402285254

Oct. 23 2007 10:51AM P1

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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07/26/2007

THE JOHNS HOPKINS UNIVERSITY APPLIED PHYSICS LABORATORY
OFFICE OF PATENT COUNSEL
11100 JOHNS HOPKINS ROAD
MAIL STOP 7-156
LAUREL, MD 20723-6099

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Mari M.L. Baldwin

(Depositor's name)

Mari M.L. Baldwin

(Signature)

10/23/2007

(Date)

10/23/2007 HDEMESS2 00000084 012218 10611487

01 FEE: 2501	720.00 DA	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
02 FEE: 1304	300.00 DA				

10/611,487

07/01/2003

Jerry A. Krill

1717-SPI.

3320

TITLE OF INVENTION: SYSTEM AND METHOD FOR REAL-TIME IMAGE CONTROL AND PROCESSING FOR USE IN WIDE AREA SPACE BASED SURVEILLANCE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	700 720.00	\$300	\$0	31000 10320.00	10/26/2007
EXAMINER		ART UNIT	CLASS-SUBCLASS			
DIEP, NHON THANH		/2621	348-144000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Albert J. Fasulo, II

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

The Johns Hopkins University

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Baltimore, Maryland 21218

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

☐ A check is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 01-2218 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(a)(2).

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Authorized Signature

Albert J. Fasulo, II

Date

10/23/07

Typed or printed name

Albert J. Fasulo, II

Registration No.

43,607

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